

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Coalition of Americans for Political Equality</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00493486       </div>	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			
Full Name (Last, First, Middle Initial) of Payee <b>GoMobile Technology, LLC</b>		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 21 / 2012</div>	
Mailing Address 1201 Orange Street Ste 600		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2500.00</div>	
City Wilmington	State DE	Zip Code 19899	Transaction ID : <b>CAPESEF38E5F9006B03C</b>
Purpose of Expenditure Social Media Marketing	Category/ Type	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2500.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee <b>GoMobile Technology, LLC</b>		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 21 / 2012</div>	
Mailing Address 1201 Orange Street Ste 600		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2000.00</div>	
City Wilmington	State DE	Zip Code 19899	Transaction ID : <b>CAPESE3F8155F68C7E0A</b>
Purpose of Expenditure Email Campaigns	Category/ Type	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4500.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4500.00</div>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) <b>TOTAL</b> Independent Expenditures.....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Margaret Berardinelli</u>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 22 / 2012</div>	
[Electronically Filed]			

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Coalition of Americans for Political Equality

FEC IDENTIFICATION NUMBER ▼

C

C00493486

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

GoMobile Technology, LLC

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Mailing Address 1201 Orange Street

Ste 600

City

Wilmington

State

DE

Zip Code

19899

Amount

2500.00

Transaction ID : CAPESE3F859B845BC870

Purpose of Expenditure  
Search Engine OptimizationCategory/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Barack Obama

Calendar Year-To-Date Per Election  
for Office Sought

7000.00

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

GoMobile Technology, LLC

Date

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M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Mailing Address 1201 Orange Street

Ste 600

City

Wilmington

State

DE

Zip Code

19899

Amount

2000.00

Transaction ID : CAPESE5FBF5BBCD01A7

Purpose of Expenditure  
Search Engine MarketingCategory/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Barack Obama

Calendar Year-To-Date Per Election  
for Office Sought

9000.00

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

4500.00

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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Margaret Berardinelli

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 3 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Coalition of Americans for Political Equality

FEC IDENTIFICATION NUMBER ▼

C

C00493486

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

GoMobile Technology, LLC

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address 1201 Orange Street

Ste 600

Amount

1500.00

City

Wilmington

State

DE

Zip Code

19899

Transaction ID : CAPESEC3910EA5876D77

Purpose of Expenditure  
Mobile App Launch Prep/GOTVCategory/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Barack Obama

Calendar Year-To-Date Per Election  
for Office Sought

10500.00

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary☐ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1500.00

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

10500.00

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Margaret Berardinelli

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature